

**Indiana University**  
**Cognitive & Information Sciences**

Psychology Bldg., Bloomington, IN 47405  
(812) 855-4658; fax: (812) 855-1086

**Internship Interest Form**\_\_\_\_\_

Your answers to the following questions will assist the internship coordinator in addressing your internship search needs.  
**NOTE: Completion of this form only guarantees that the Cognitive Science Program will assist you in locating an internship opportunity. It does not imply or guarantee that we will "get" you an internship. You are ultimately responsible for securing your own internship assignment.**

Name\_\_\_\_\_ Date\_\_\_\_\_

Student I.D.\_\_\_\_\_ E-mail\_\_\_\_\_

Local Address\_\_\_\_\_ Phone\_\_\_\_\_

Major(s)\_\_\_\_\_ Minor(s)\_\_\_\_\_

Class Standing: FR SO JR SR Grad. Alumni G.P.A.\_\_\_\_\_

Expected graduation date:\_\_\_\_\_

Semester for which the internship is desired? Fall Spring Summer

Desired geographic location of internship? ANY or Specific:\_\_\_\_\_

Are you willing to accept an unpaid internship? Yes No Full- or Part-time or Any?\_\_\_\_\_

1. Cognitive science related coursework completed (include course numbers and titles ):

2. Type of internship position desired and/or description of skills that you want to develop/apply in the internship.

3. How does an internship in this area fit into your academic and professional goals/objectives?

